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Under the Pape	rwork Reduction Act of	uired to re	respond to a collection of information unless it displays a valid OMB control number.					
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known Application Number 10/664,355-C				
FEE TRANSMITTAL				/ tppillodatori (taliibo)		September 17, 2003		
For FY 2006						Masumi SUETSUGU		
FOI F1 2006				*		R. E. Ashton		
Applicant	laims small entity sta	7		752				
	······································	T		Art Unit	-	85-0698P		
TOTAL AMOUNT OF PAYMENT (\$) 810.00				Attorney Docket N				
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify):								
x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17								1
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
	F	ILING FEES	SEA	ARCH FEES Small Entity	EXAMINA	ATION FEES Small Entity		
Application Typ	pe <u>Fee (</u>	Small Entity See (\$)	Fee (\$		Fee (\$)	Fee (\$)	Fees	Paid (\$)
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
E, C/(VIII) CCV								Small Entity
Fee Description							Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)							50 200	25 100
Each independent claim over 3 (including Reissues) Multiple dependent claims							360	180
1		- 4	F !	Daid (A)	M	ltiple Depende		
				Paid (\$) Multiple Depen Fee (\$)			Fee Paid (\$)	
	per of total claims paid f	··).00	360.00	2.7
Indep. Claims	Extra Claims	Fee (\$)	Fee I	Paid (\$)		<u></u>		_
1 = 0 × =								
HP = highest number of independent claims paid for, if greater than 3.						0.00_	360.00	
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
- 100 = /50 (round up to a whole number) x =								
4. OTHER FEE(S)								s Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)								EO 00
Other (e.g., late filing surcharge): 1252 Extension for response within second month 450.00								
SUBMITTED BY Provide No.								
Signature	Signature / /////			(Attorney/Agent)		(703) 2	(703) 205-8000	
Name (Print/Type)	Name (Print/Type) Andrew D. Weikle						July 10	0, 2006